Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

FJ-2000-045-US

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			Q		1 3			RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMB	ER EXTRA		BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			9 minus 20=		• \$			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			minus 3 =		٠ 2			X40=		OR	X80=	160
MULTIPLE DEPENDENT CLAIM PRESENT								+135=		OR	+270=	100
* If the difference in column 1 is less than zero, enter					"0" in c	olumn 2	1	TOTAL		OR	TOTAL	870
CLAIMS AS AMENDED - PART II							•			OTHER		
(Column 1)				(Colur		(Column 3)		SMALLE	NTITY	OR	R SMALL ENTITY	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	* NTATION OF M	Minus	***	F CL AINA	=		X40=		OR	X80=	
<u> </u>	rinoi Fricoc	NTATION OF W	JETIFEE DEF	ENDEN	CLAIM		•	+135=		OR	+270=	
DECT AVAILABLE CO								TOTAL		OR	TOTAL ADDIT. FEE	
(Column 1) BEST AVAILABLE COPYDIT. FEE OR ADDIT. FEE (Column 3)												
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IEST BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	* .	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		<u> </u> =]	X40=		OR	X80=	
<u> </u>	FIRST PRESE	NTATION OF M	ULTIPLE DEP	ENDEN	CLAIM		J	+135=		OR	+270=	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu	mn 2)	(Column 3)		ADDII: 1 EE •		-	ADDIT: 1 EE	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	IEST IBER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	i	RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	T () A 11 1]=	↓	X40=		OR	X80=	
L	FINST PHESE	NTATION OF M	ULTIPLE DEF	ENDEN	CLAIM		1	+135=		OR	+270=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.											TOTAL	
***	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											